



Related Medlearn Matters Article #: MM3848

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### *Clarifying Manual Instructions for Coding and Payment for Drug Administration Under the Hospital Outpatient Prospective Payment System (OPPS)*

#### Key Words

MM3848, CR3848, Drug, OPPS

#### Provider Types Affected

Physicians and providers billing services paid under the OPPS to Medicare Fiscal Intermediaries (FIs), including Regional Home Health Intermediaries (RHHIs)

#### Key Points

- The effective date for this instruction is January 1, 2005.
- MM3848 clarifies portions of Section 230 in the Medicare Claims Processing Manual (Pub 100-04), Chapter 4.
- Various sub-sections have been revised or created for this manual update as shown in the table on page 2 of MM3848.
- MM3848 also instructs FIs and RHHIs to follow the reorganized instructions in Pub. 100-04, Chapter 4, Section 230.
- In addition to the clarifications, CMS has provided some examples to help providers better understand the drug administration policies. The examples further explain the following:
  - Administration of Chemotherapy Drugs by Infusion (Section 230.2.2);
  - Administration of Non-Chemotherapy Drugs by Infusion (Section 230.2.4);
  - Use of Modifier 59 (Section 230.2.6); and
  - Billing for Infusion Hours (Section 230.2.7).

#### Important Links

<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/MM3848.pdf>

[http://www.cms.hhs.gov/manuals/pm\\_trans/R557CP.pdf](http://www.cms.hhs.gov/manuals/pm_trans/R557CP.pdf)